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PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number 09/927422

377882001420

		CLAIM		ILED - P.		oluma 2)	s	MALL	ENTITY	OR		R THAN ENTITY
FOR			NUMBER FILED		NUMBER	NUMBER EXTRA		ATE	FEE]	RATE	FEE
BASIC FEE (37 CFR 1.16(a))									\$355.00	OR		\$710.00
TOTAL CLAIMS (37 CFR 1.16(c))			124 minus 20 =		20 =	104		10	\$936.00	OR	\$18.00	s -
INDEPENDENT CLAIMS (37 CFR 1.16(b))			4 minus 3 =		3.4	1		.00	\$40.00	OR	\$80.00	\$*
MUI	MULTIPLE DEPENDENT CLAIM PRESEN			SENT (37 CFR 1.16(d))			+\$13	5.00	\$135,00	OR	\$270.00	\$.
*1f ds	se different in column 1	is less than zero	, enter "0" i	in column 2			TOT	AL	\$1111.00	OR	TOTAL	\$.
14	laloy.	CLAIMS A	AS AME	ENDED -	PART II (Column 2)	(Column 3)	s	MALL	ENTITY	OR		R THAN ENTITY
AMENDMENT A		CLAIMS REMAINI AFTER AMENDM	· ·		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	12	0	Minus	20/24	0	x\$9.0	0	\$*	OR	\$18.00	\$*
	Independent		7		121	0	x\$40.	.00	\$.	OR	\$80.00	s.
ME	(37 CFR 1.16(b))		1	Minus	11				<u> 1</u>			
AME		ATION OF A	(L,	ENT CLAIM (37 CFR 1.16(d))	+513		s·	ÓR	+\$270.00	5.
AME	(37 CFR 1.16(b)) FIRST PRESENT	ATION OF A	(AULTIPLI	L,	ENT CLAIM (37 CFR 1.16(d))	+513	5.00 AL	5.	1	TOTAL	
AME		ATION OF M	(L,	ENT CLAIM (37 CFR 1.16(d))	+513	5.00		ÓR OR		\$°
AME		ATION OF A		L,	(Column 2)	37 CFR 1.16(d)) (Column 3)	+513	5.00 AL	5.	1	TOTAL	<u> </u>
		(Colum CLAIMS REMAINI AFTER	m 1) NG	L,	(Column 2) HIGHEST NUMBER PREVIOUSLY		+S13 TOTA ADD	5.00 AL	5.	1	TOTAL	<u> </u>
8		(Colum CLAIMS REMAINI	m 1) NG	L,	(Column 2) HIGHEST NUMBER	(Column 3) PRESENT	+S13 TOTA ADD	S.00 AL II. FEE ATE	\$° ADDITIONAL	1	TOTAL ADDIT. FEE	S* ADDITIONAL
8	FIRST PRESENT Total (37 CFR 1.16(c)) Independent	(Colum CLAIMS REMAINI AFTER	m 1) NG	E DEPEND	(Column 2) HIGHEST NUMBER PREVIOUSLY	(Column 3) PRESENT EXTRA	+\$13 TOTA ADD	S.00 AL IT. FEE ATE	\$* ADDITIONAL FEE	OR	TOTAL ADDIT. FEE RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c)) Independent (37 CFR 1.16(b))	(Colum CLAIMS REMAINI AFTER AMENDM	m 1) NG IENT	E DEPEND Minus Minus	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	+\$13 TOT. ADD	ATE O	\$* ADDITIONAL FEE \$*	OR OR	RATE	ADDI- TIONAL FEE
8	FIRST PRESENT Total (37 CFR 1.16(c)) Independent	(Colum CLAIMS REMAINI AFTER AMENDM	m 1) NG IENT	E DEPEND Minus Minus	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	+513 TOT. ADD R x59.0 x540. +513	ATE O O O O O O O O O O O O O O O O O O O	\$* ADDITIONAL FEE \$'	OR OR	RATE \$18.00 \$80.00	ADDI- TIONAL FEE \$'
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AMENDMENT B	Total (37 CFR 1.16(c)) Independent (37 CFR 1.16(b)) FIRST PRESENT	(Column Claims REMAIN! AFTER AMENDM (Column CLAIMS REMAIN! AFTER	m 1) NG IENT AULTIPLE m 1)	Minus Minus E DEPEND	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR ENT CLAIM (COlumn 2) HIGHEST NUMBER PREVIOUSLY	(Column 3) PRESENT EXTRA as as as a column 3) (Column 3) PRESENT EXTRA	+\$13 TOT. ADD R x\$9.0 x\$40. +\$13 TOT. ADD	ATE O O O AL IT. FEE O O O O AL IT. FEE	\$° ADDITIONAL FEE \$° \$° \$° ADDITIONAL FEE	OR OR OR OR	RATE RATE \$18.00 \$80.00 +\$270.00 TOTAL ADDIT FEE	ADDI- TIONAL FEE \$' \$' \$' ADDI- TIONAL FEE
C AMENDMENT B	Total (37 CFR 1.16(c)) Independent (37 CFR 1.16(b)) FIRST PRESENT Total (37 CFR 1.16(c)) Independent	(Column CLAIMS REMAINI AFTER AMENDM CLAIMS REMAINI AFTER AMENDM	m !) NG IENT 4ULTIPLI m !) NG	Minus DEPEND Minus Minus Minus Minus	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR ENT CLAIM (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA =* 37 CFR 1.16(d)) (Column 3) PRESENT EXTRA	+513 TOT. ADD x59.0 x540. +513 TOT. ADD	ATE O O S.OO AL IT. FEE ATE O OO	\$° ADDITIONAL FEE \$° \$° ADDITIONAL FEE \$° \$°	OR OR OR OR	RATE \$18.00 \$80.00 +\$270.00 TOTAL ADDIT FEE RATE \$18.00	ST ADDITIONAL FEE

If the entry in column 1 is less than the entry in column 2, write "O" in column 3.

If the "Highest Number Previously Paid For" IN THBS SPACE is less than 20, enter "30"

If the "Highest Number Previously Paid For" IN THBS SPACE is less than 3, enter "3"

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hours Statement: This form is estimated to take 0.2 hours to complete. Time will very depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chrief Information Officer, U.S. Pattent and Tradement Officer, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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